

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 1
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) DSCC			FEC IDENTIFICATION NUMBER ▼ C C00042366		
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on			MM / DD / YYYY		
Full Name of Payee GPS Impact			Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 04 / 2022		
Mailing Address 220 SE 6th St Ste 330			Amount 918.00		
City Des Moines State IA Zip Code 50309-4845		Transaction ID : 500011748			
Purpose of Expenditure Media Production		Category/Type		Date of Disbursement or Obligation MM / DD / YYYY 11 / 04 / 2022	
Name of Federal Candidate OZ, MEHMET, DR, ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought		5815661.27		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Great American Media			Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 04 / 2022		
Mailing Address 3050 K St NW Ste 100			Amount 1000000.00		
City Washington State DC Zip Code 20007-5161		Transaction ID : 500011747			
Purpose of Expenditure Media Buy		Category/Type		Date of Disbursement or Obligation MM / DD / YYYY 11 / 03 / 2022	
Name of Federal Candidate OZ, MEHMET, DR, ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought		5815661.27		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			1000918.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶			1000918.00		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Wright, Allison, , ,		[Electronically Filed]		Date MM / DD / YYYY 11 / 05 / 2022	
Signature					